

## PATENT COOPERATION TREATY

⑥

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NOTIFICATION OF THE INTERNATIONAL  
APPLICATION NUMBER AND OF THE  
INTERNATIONAL FILING DATE

(PCT Rule 20.5(c))

Date of mailing  
(day/month/year)

14 07 2004

Applicant's or agent's file reference

39075/GM/Ip

## IMPORTANT NOTIFICATION

International application No.

PCT/EP2004/006729

International filing date (day/month/year)

22/06/2004

Priority date (day/month/year)

03/07/2003

Applicant

SANTONI S.P.A.

Title of the invention

1. The applicant is hereby notified that the international application has been accorded the international application number and the international filing date indicated above.
2. The applicant is further notified that the record copy of the international application was transmitted to the International Bureau on the above date of mailing.

3.

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# PCT

## REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

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PCT/EP 2004 / 0 0 6 7 2 9  
International Application No.

(22.06.2004) 22 JUN 2004  
International Filing Date

EUROPEAN PATENT OFFICE  
PCT INTERNATIONAL APPLICATION  
Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference  
(if desired) (12 characters maximum) 39075/GM/lp

<b>Box No. I TITLE OF INVENTION</b> METHOD FOR PRODUCING INTARSIA DESIGNS WITH A CIRCULAR KNITTING MACHINE	
<b>Box No. II APPLICANT</b> <input type="checkbox"/> This person is also inventor	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) SANTONI S.p.A. Via C. Fenzi, 14 25135 BRESCIA IT	
Telephone No.	
Facsimile No.	
Teleprinter No.	
Applicant's registration No. with the Office	
State (that is, country) of nationality: IT	State (that is, country) of residence: IT
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<b>Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)</b>	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) LONATI Ettore Piazza Paganora, 5 25121 BRESCIA IT	
This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
Applicant's registration No. with the Office	
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<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
<b>Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE</b>	
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: <input checked="" type="checkbox"/> agent <input type="checkbox"/> common representative	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) MODIANO Guido MODIANO & ASSOCIATI Via Meravigli, 16 20123 MILANO IT	
Telephone No. (003902) 85 90 77 77	
Facsimile No. (003902) 863 860	
Teleprinter No.	
Agent's registration No. with the Office	
<input type="checkbox"/> Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

Sheet No. ...2...

Continuation of Box No. III <b>FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)</b>	
<i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i>	
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State (that is, country) of nationality: <b>IT</b>	State (that is, country) of residence: <b>IT</b>
<p>This person is applicant for the purposes of:    <input type="checkbox"/> all designated States    <input type="checkbox"/> all designated States except the United States of America    <input checked="" type="checkbox"/> the United States of America only    <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p><small>Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</small></p> <p><b>LONATI Tiberio</b>  <b>Via Sera, 24</b>  <b>25121 BRESCIA</b>  <b>IT</b></p>	<p><b>This person is:</b></p> <p><input type="checkbox"/> applicant only</p> <p><input checked="" type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)</p> <p>Applicant's registration No. with the Office</p>
State (that is, country) of nationality: <b>IT</b>	State (that is, country) of residence: <b>IT</b>
<p>This person is applicant for the purposes of:    <input type="checkbox"/> all designated States    <input type="checkbox"/> all designated States except the United States of America    <input checked="" type="checkbox"/> the United States of America only    <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
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<p><small>Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</small></p>	<p><b>This person is:</b></p> <p><input type="checkbox"/> applicant only</p> <p><input type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)</p> <p>Applicant's registration No. with the Office</p>
State (that is, country) of nationality:	State (that is, country) of residence:
<p>This person is applicant for the purposes of:    <input type="checkbox"/> all designated States    <input type="checkbox"/> all designated States except the United States of America    <input type="checkbox"/> the United States of America only    <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p><input type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.</p>	

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Sheet No. .... 4 .....

**Box No. IX CHECK LIST; LANGUAGE OF FILING**

This international application contains:

(a) in paper form, the following number of sheets:

request (including declaration sheets) : 4  
 description (excluding sequence listing and/or tables related thereto) : 6  
 claims : 1  
 abstract : 1  
 drawings : 1

Sub-total number of sheets : 13

sequence listing :  
 tables related thereto :

(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)

Total number of sheets : 13

(b) ☐ only in computer readable form (Section 801(a)(i))

(i) ☐ sequence listing  
 (ii) ☐ tables related thereto

(c) ☐ also in computer readable form (Section 801(a)(ii))

(i) ☐ sequence listing  
 (ii) ☐ tables related thereto

Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the

☐ sequence listing: .....☐ tables related thereto: .....

(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)

This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):

- |   | Number of items |
|---|-----------------|
| 1. <input checked="" type="checkbox"/> fee calculation sheet  | 1               |
| 2. <input checked="" type="checkbox"/> original separate power of attorney  | 2               |
| 3. <input type="checkbox"/> original general power of attorney  |                 |
| 4. <input type="checkbox"/> copy of general power of attorney; reference number, if any: .....  |                 |
| 5. <input type="checkbox"/> statement explaining lack of signature  |                 |
| 6. <input checked="" type="checkbox"/> priority document(s) identified in Box No. VI as item(s): ... (1) .....  | 1               |
| 7. <input type="checkbox"/> translation of international application into (language): .....   |                 |
| 8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material  |                 |
| 9. <input type="checkbox"/> sequence listing in computer readable form (indicate type and number of carriers)   |                 |
| (i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application) :   |                 |
| (ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter :              |                 |
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| 11. <input type="checkbox"/> other (specify): .....   |                 |

Figure of the drawings which should accompany the abstract: Sole Figure

Language of filing of the international application: ENGLISH

**Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE**

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).

Milano, Italy  
 June 17, 2004

MODIANO Guido



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1. Date of actual receipt of the purported international application:

( 2 2. 06. 04 )

22 JUN 2004

3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:

4. Date of timely receipt of the required corrections under PCT Article 11(2):

5. International Searching Authority (if two or more are competent): ISA /

6. ☐ Transmittal of search copy delayed until search fee is paid

2. Drawings:

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